

U. S. Department of Housing and Urban Development

Office of Public and Indian Housing

Special Attention of:

**Secretary's Representatives,
State/Area Coordinators,
Directors, Office of Public Housing
Directors, Office of Housing
Administrators,
Area Offices of Native
American Programs, Executive
Directors, Public and Indian**

Notice PIH 98-43 (HUD)

Issued: July 31, 1998

Expires: July 31, 1999

Cross Reference

**SUBJECT: PROCESSING OF GRANT APPLICATIONS FOR FISCAL YEAR (FY) 1998
SUPERNOFA - Public and Indian Housing Economic Development and Supportive Services
Program (EDSS)**

1. PURPOSE

This Notice provides instructions for Office of Public Housing (OPH) / Area Office of Native American Programs (AONAP) responsibilities in processing Economic Development and Supportive Services (EDSS) Program grant applications submitted for funding under the Fiscal Year (FY) 1998 SuperNOFA for Economic Development and Empowerment Programs.

2. APPLICABILITY

This notice is applicable to Public Housing Authorities (PHA), Tribes, and Tribally Designated Housing Entities (TDHE) to enable them to establish and implement programs that increase resident self-sufficiency and support continued independent living for elderly and disabled residents.

3. BACKGROUND

- A. A SuperNOFA announcing \$47.2 million in grant funds was published in **The Federal Register** on April 30, 1998. The Department is setting aside \$5 million of the amount to fund applications from Tribes/TDHEs, with the remainder available to fund applications from PHAs.
- B. Planning and Development section of the Fiscal Year 1998 Congressional appropriation entitled "An Act making appropriation for the Department of Veteran Affairs and Housing and Urban Development, and for sundry independent agencies, boards, commissions, corporations, and offices for the fiscal year ending September 30, 1998, and for other purposes," (Pub.L. 105-65, approved October 27, 1997).

On Wednesday, July 8, 1998, HUD published in the Federal Register a Technical correction to the TOP/EDSS portion of the SuperNOFA. The technical correction affects Section III(A)(6); the indicator number for the Resident Initiatives is Indicator #7, not #8. Accordingly, paragraph (6), titled "PHMAP Score," is corrected to read:

“..An applicant cannot have a PHMAP score less than a C for either Indicator #6, Financial Management, or Indicator #7, Resident Services/Community Building, on its most recent PHMAP.”

4. FUND ASSIGNMENT PLAN

The fund assignment plan for distributing grant funds to be awarded as announced for the EDSS under the FY 1998 SuperNOFA will be implemented in accordance with Handbook 1830.4 REV-2, dated July 31, 1986.

5. DEFINITIONS

The common definitions for the consolidated TOP/EDSS Programs are contained in Appendix A of the TOP/EDSS portion of the SuperNOFA.

*** Note that all applicants must be PHAs or Tribes/TDHEs that have not received a prior EDSS grant. This information can be verified through OPH/AONAP records.**

6. GENERAL

A. PHAs and Tribes/TDHEs are the eligible applicants under EDSS. PHAs and Tribes/TDHEs are required under the program to evidence a 100% match of the total amount of funds being requested under the EDSS program. At least 25% of the match amount must consist of a monetary contribution of funds, and the remaining 75% in in-kind or other types of contributions. Salaries paid for with EDSS funds do not qualify as funds from sources outside HUD.

B. Funding types/eligible activities

The two funding types under the EDSS Program are (83 FR 23909):

- Family Economic Development and Supportive Services;
- Supportive Services to Assist the Elderly and/or Persons with Disabilities

Eligible activities are described in the TOP/EDSS portion of the SuperNOFA, page 78 (F) and 83 FR 23909-23910.

C. Application requirements

To receive funding, PHAs/Tribes/TDHEs must submit a grant application to the local HUD Office using an application kit, which contains information on all exhibits and certifications required under the SuperNOFA. Applications are due or must be postmarked by **6:00 p.m. (local time), Friday, July 31, 1998.**

D. Application distribution for FY 1998

Headquarters printed and distributed the application kit to OPHs/AONAPs, PHAs and Tribes/TDHEs. The application is also available by calling the HUD SuperNOFA

Information Center at **1-800-HUD-8929**.

E. Processing Center

Headquarters will utilize the Grants Management Center (GMC) as the official Processing Center for EDSS grants. OPHs should fax Master Log sheets and forward completed applications (including checklists and other documentation) to the following address:

Vivian Williams
501 School Street, SW, Suite 800
Washington, DC 20024
Phone: (202) 358-0221 ext. 127 Fax: (202) 358-0258

All AONAPs should fax their Master Log sheets and forward completed applications (including checklists and other documentation) to the following address:

Tracy C. Outlaw
1999 Broadway, Suite 3390,
Denver, CO 80202
Phone: (303)-675-1600 Fax: (303)-675-1660.

7. APPLICATION PROCESSING

A. References

The Resident Initiatives Grants Management Notice and Handbook (7490.01), issued April 7, 1993, shall be used as guides for processing EDSS applications.

B. Receipt of applications

- (1) GMC program staff will serve as the program liaison during the entire application review process.
- (2) OPH/AONAP will receive applications in accordance with the procedures set forth in the Resident Initiatives Grants Handbook, and related HUD regulations such as the TOP/EDSS portion of the SuperNOFA, or other guidance provided by Headquarters.
- (3) Applications shall be received and logged in accordance with Chapter 2 of the Resident Initiatives Grants Management Handbook (7490.01) with the following additional guidance:
 - a. Fax a copy of the applicable completed Master Log sheets to **Vivian Williams**, Grants Management Center, at (202) 358-0258 (PHAs), or to **Tracy Outlaw**, ONAP, at (303) 675-1660 (Tribes/TDHEs) by **August 3, 1998**.
 - b. If the OPH/AONAP receives an application not in its jurisdiction by the application deadline date, the OPH/AONAP shall ensure the following

actions take place:

- 1) Log the date and time of receipt in the Master Log;
- 2) Transfer the application to the appropriate local OPH/ AONAP **via overnight mail with a transmittal memo** to the Director, OPH/Administrator, AONAP within 24 hours of receipt of the application; and
- 3) Notify the OPH/AONAP by telephone that the application is being forwarded. The OPH/AONAP receiving the application shall log in the application according to the prior OPH/AONAP receipt date and time.
- 4) Send acknowledgment letter to each applicant.

C. Screening Process/Checklist

Note: When in doubt determining whether an applicant is eligible/ineligible, or whether an item is curable/non-curable, contact the GMC.

- (1) The receiving OPH/AONAP begins the screening process with a review of each application in its entirety, checking for deficiencies with respect to completeness, consistency, and accuracy, in accordance with the Screening Checklist, Attachment F of this Notice.
- (2) Screeners should review only to ensure that narratives, required forms, certifications, and other attachments are provided. A detailed review of the application will be conducted during the GMC review.
- (3) Screening should be performed by a single reviewer as assigned by the Director, OPH/Administrator, AONAP. Reviewers should place their signature on the signature line indicating their review.
- (4) The **Grant Program Process Checklist**, Appendix C of this Notice, is provided to assist and manage the screening stage of applications. It is recommended that the Checklist items be initialed and dated as each step is completed in the review process. Additionally, as the reviewers screen each application, they must complete the **Application Screening Checklist**, Appendix D of this Notice, which provides information on curable and non-curable deficiencies. On the Checklist, check whether any deficiency noted has been completed ("Y" = Yes; "N" = No).
- (5) If a **curable deficiency** is found, the OPH/AONAP must send the applicant a deficiency letter. Applicants will have 14 calendar days from the date of the letter to respond to deficiencies. Once the 14-day period is complete, applications containing deficiencies will be rescreened, taking into account responses provided to deficiency letters.
- (6) If a **non-curable deficiency** is found, the OPH/AONAP will hold the application

pending completion of the entire process.

- (7) A deficiency may be cured so long as it is predicated upon the completeness, internal consistency or accuracy of computation contained in the grant application, and curing the deficiency will not result in substantially revising the application or changing the activities of the program. The OPH/AONAP shall not further consider the application containing incurable deficiencies.
- (8) If an application contains information that the screener knows or believes is inaccurate, the screener may treat the inaccurate information as a deficiency and the application as incomplete, inconsistent or containing incorrect computations.
- (9) If the screener is not certain whether a deficiency is curable, the screener must consult with the GMC. Screeners should annotate whom they spoke with and the outcome, and forward this documentation with the application.
- (10) Examples where a deficiency clearly is **not curable** are:
 - where an applicant does not meet the deadline date requirement; or
 - where an applicant is not an eligible PHA/Tribe/TDHE; or
 - where an eligible applicant has been substituted for an ineligible applicant.

A PHA/Tribe/TDHE application that omits any item under the Threshold Criteria Check List in Tab 8 of the application kit shall be considered incomplete. If the threshold item does not affect the actual rating/ranking of the application, then there are some cases where the item can be curable.

- (11) If the deficiency is curable, the OPH/AONAP shall send a deficiency letter (see **Sample Deficiency Letter**, Appendix E of this Notice) to the applicant. The letter must contain the following elements:
 - Specifically list and explain the nature of each deficiency;
 - Explain what has to be provided to cure the deficiency;
 - State the deadline date (the **14th calendar day after the date of the letter**) for responding to the deficiency and that the response must be **received** back by that date; and
 - State that an applicant's failure to adequately respond to the deficiency letter by the deadline date will result in its application no longer being considered.
 - In addition, the letter will state that in responding to the deficiency, the applicant may change only the item(s) noted as

deficiencies and any portion of the application that is made inconsistent by the applicant's response to the deficiency.

- Each screener at the OPH/AONAP must also fax the signed deficiency letter to the applicant, stating on the cover sheet that the original of the deficiency letter has been mailed to the applicant. If an applicant fails to respond to the deficiency letter within the time deadline set, the OPH/AONAP shall not further consider its application.
- (12) Upon completion of the screening process, the screener is to sign and date the screening checklist to signify that the entire application has been reviewed, and make appropriate notation in the application file as to disposition.
- (13) If an application is determined to contain **no deficiencies**, the application should be held for forwarding to the GMC, as well as to the ONAP Area Administrator, as outlined in Section F of this Notice.

*** All applications, including those that are deemed ineligible, shall be forwarded to the Grants Management Center.**

D. Rescreening

- (1) Once an applicant responds to a deficiency letter, the application must be rescreened for completeness, consistency, and accuracy. Utilize the **Application Rescreening Checklist, Appendix F of this Notice**, to ensure that an applicant has not substantially revised its application or changed fundamental features of the program to cure deficiencies. Examples of such changes would be:
- changing the applicant's name;
 - replacing an ineligible applicant with one that is eligible; and
 - changing responses other than to cure incorrect computations or revisions required to correct inconsistencies with other criteria.
- (2) Screeners who believe that an applicant has substantially revised its application or changed a fundamental feature of a program not listed in the previous examples must consult with the Grants Management Center or Office of Native American Programs to determine whether the proposed cure is acceptable.

E. Comments

- (1) In addition to screening for deficiencies, Secretary's Representatives and OPH/AONAP reviewers are invited to provide comments of a first-hand factual nature that do not constitute deficiencies. The comments will be used as background material for reviewers performing scoring. Such comments might cover the capacity of the applicant for carrying out the activities proposed under the request. Comments should be recorded on the **Comment Form, Appendix G** of this Notice.

F. Reviewing and Scoring Procedures

- (1) At the completion of the local level review (screening and rescreening) of all applications, the OPH Director and AONAP Administrator shall review and score Rating Factor 5, "Comprehensiveness and Coordination." For Tribes/TDHEs' applications received under this program, Rating Factor 5 will be reviewed and scored by the Area ONAP Administrator. Ranking guidance for Rating Factor 5 and a score sheet are provided in the Appendix of this Notice.

*** Note: Rating Factors 1-4 will be reviewed and scored at the respective Processing Center, the GMC or ONAP, Denver.**

- (2) The OPH/AONAP will forward a copies of the application and Rating Factor 5 score sheets to the Secretary's Representative/Senior Community Builder, who has the option to review and provide comments for Rating Factor 5. If this option is chosen, the Secretary's Representative/Senior Community Builder will provide these comments to the Field Office **within seven (7) days of receipt**. Otherwise, the Secretary's Representative/Senior Community Builder must indicate on the application that they do not have comments and return the application to the Field Office **within seven (7) days of receipt**. Comments made by the Secretary's Representative/Senior Community Builder will then be taken into consideration by the panel of reviewers.
- (3) After completing the review and scoring of Rating Factor 5, the OPH/ONAP Area Administrator will retain one (1) copy of each EDSS application; the original and one (1) copy of all applications will be sent to the GMC or ONAP, Denver, by Federal Express in order to ensure arrival by **Friday, August 14, 1998, 6:00pm. If the Secretary's Representative's/Senior Community Builder's comments have not been received by this date, the application will still be forwarded to the GMC or ONAP, Denver, and the OPH/AONAP will fax the comments upon receipt.**

*** Note: All applications, including those that are determined ineligible, shall be forwarded to the GMC or ONAP, Denver.**

- (4) The OPHs/AONAPs will include the following items when shipping the applications to the GMC or ONAP, Denver:
 - Transmittal Letter: This letter must identify the number of boxes, the total number of applications shipped, and a listing of all ineligible applications with the reason for rejection.
 - Application Master Logs
 - Application Screening Checklist
 - Application Comment Form
 - Application Rescreening Checklist
 - Corrected Deficiency Log
 - Curable Deficiency letters and corrected deficiencies attached to each application. **If the corrected deficiency is not received by this date, the application will still be forwarded to the GMC, and the corrected**

application will be faxed upon receipt by the field office.

- Secretary Representative's Comments (if applicable)

- 5) For GMC management purposes, number and label boxes by EDSS Applicant type (Family EDSS or Elderly/Disabled SS) and include all of the above requested documents. **Within each box, those applications pending deficiency corrections and Secretary's Representative's comments should be kept separate and clearly identified.**

All boxes must be mailed **via Federal Express** in order to ensure receipt by **August 14, 1998**, to the appropriate address:

**Grants Management Center
Attn: Vivian Williams
501 School St. S.W., Suite 800
Washington D.C. 20024**

**ONAP Grants Processing Center
Attn: Tracy Outlaw
1999 Broadway, Suite 3390
Denver, CO 80202**

8. EVALUATING AND RATING APPLICATIONS

Applicants are eligible for the award of two (2) EZ/EC bonus points, as described in the General Section of the SuperNOFA (See appendix J for scoring) for eligible activities/projects that are proposed to be located in federally-designated Empowerment Zones, Enterprise Communities, or Urban Enhanced Enterprise Communities, and serve EZ/EC residents and are certified to be consistent with the strategic plan of the Ezs/ECs. EDSS applications must receive a total of 75 points out of 100 in order to be eligible for funding.

HUD will review and evaluate the application according to whether the application seeks funds for Family Economic Development and Supportive Services or for Supportive Services to assist the Elderly and/or Persons with Disabilities. All applications will be placed in ranking order and funded until funds are exhausted.

9. CONGRESSIONAL NOTIFICATIONS

Congressional notifications will be prepared by staff at the GMC. A memorandum will be submitted along with a listing of the grant awards to the Assistant Secretary for Congressional and Intergovernmental Relations, who will officially notify Congress.

10. NOTIFICATIONS TO SELECTEES AND NON-SELECTEES

- A. The GMC staff will prepare and forward, via cc:mail , a list of award recipients and sample award letters to OPHs/AONAPs. The award letters will not be sent until:
 - (1) The Public and Indian Housing (PIH) Office of Management and Policy Budget Division prepares the Form HUD-185 (Fund Assignment) for the grantees selected. Upon validation of funding availability, by the Office of the Chief Financial Officer (CFO), the Assistant Secretary for PIH will sign the Form HUD-185 and send to the appropriate Field Offices/AONAP via pouch mail; and
 - (2) Congressional and Intergovernmental Relations has completed the notification to Congress.

- B. The OPHs/AONAPs will provide written notification to all applicants whether or not they have been selected.
- C. The OPHs/AONAPs will provide a signature copy of each award letter to the Field Accounting Division(FAD) to reserve grant funds. The FAD will validate that sufficient funds are available and record the reservation of funds into the Program Accounting System (PAS) after receiving a copy of the grant approval letter and the Form HUD-185.

11. PROJECT NUMBER STRUCTURE

The financial procedures to be followed shall be in accordance with Chapter 4 of the Resident Initiatives Grants Management Handbook with the following additions:

Each application is assigned a project number that is entered in the PAS data module. The project numbers are used to identify the applications selected for funding, the type of funding awarded, and are the same numbers later used as the grant agreement number. The project numbers for EDSS contain 14 characters as example below:

State/Field Office/**Code**/HA/Sequence Number/Fiscal Year Indicator
 GA 06 **EDC** 104 01 96

EDC - denotes funding to applicants proposing to conduct economic development and supportive services activities.

State/Field Office/**Code**/HA/Sequence Number/Fiscal Year Indicator
 GA 06 **EDS** 104 01 96

EDS - denotes funding to applicants proposing to conduct supportive services to the elderly and/or persons with disabilities.

The Payment Voucher -- Form HUD-50080-**EDSS** -- prefix voucher number for Economic Development and Supportive Services is: **073**.

12. GRANT AGREEMENT PREPARATION

- A. Headquarters will forward grant agreements and any special instructions related to the grant execution to OPH/AONAP via cc:Mail. The OPH/AONAP Offices will prepare Form HUD-1044, with attached grant agreement and related forms in accordance with Chapter 4 of the Grants Management Handbook 4790.01 and other instructions provided by Headquarters. The OPH/AONAP prepares the grant agreement, which is signed by the Director, OPH/Administrator, AONAP [or Public Housing Management Division Director for co-located offices]. The grant agreement must identify any special conditions for the grantees based on the OPH/AONAP review of the application. The special conditions must specify the applicant's responsibilities (e.g., submit a revised plan, budget and/or schedule, or provide clarification to resolve eligibility or reasonableness of costs). **Note: For Elderly/Disabled, there can be no duplication of funding. Grantees cannot receive awards from more than one program.**

- B. The OPH/AONAP must prepare for each grantee a grant agreement package that includes three copies of a completed Form HUD-1044 - "Assistance Award/Amendment", the program grant agreement, and the forms listed in A above. OPH/AONAP must complete (but not sign) the grant agreement and Form HUD-1044 for each grantee.
- C. The OPH/AONAP must transmit the grant agreement package to the grantee with a cover letter. The grantee must complete blocks 10 and 19 of Form HUD-1044. In addition, the grantee must sign all three copies of Form HUD-1044 and forward them to the OPH/AONAP within two weeks of the date of the HUD transmittal letter along with the following forms and documentation:
- (1) A Direct Deposit Sign-Up Form SF-1199A and cancelled check. Note that the Line of Credit Control System (LOCCS) program area code name for the Economic Development and Supportive Services program is "EDSS" and must be typed into Section 1, Block F of the form. This form is required for all grantees that are not currently receiving grant funding through the LOCCS/VRS (Voice Response System). Grantees who already have access to LOCCS will also need to complete a form and request that EDSS be added to their access.
 - (2) A revised program plan or other materials required by any special conditions of the grant award;
 - (3) A signed original of the LOCCS Voice Response Access Authorization Form HUD-27054 and one signed/notarized copy. Note that the LOCCS program code name for Economic Development and Supportive Services - EDSS - must be typed into Block 5a. of the form; and
 - (4) A copy of the Internal Revenue Service (IRS) source document establishing the grantee's Taxpayer Identification Number (TIN) (only for grantees who are not currently LOCCS users).
- D. The OPH/AONAP shall maintain a supply of the forms/documents to be distributed as a part of the grant agreement package to each grantee, as needed. The Field Administrative Officer should be aware of this requirement. (The Field Administrative Officer must also maintain a supply of Form HUD-27054-A, which is used by HUD employees to obtain access to LOCCS.) The Form HUD-27054-A is available on the LAN HUD Forms.
- The grant agreement package includes the program grant agreement and the following forms:
- (1) Form HUD-1044, Assistance Award/Amendment;
 - (2) LOCCS Voice Response System (VRS) Access Authorization - Form HUD-27054 and instructions (for use by grantees);
 - (3) LOCCS Voice Response System (VRS) Access Authorization - Form HUD 20754-A (which is used by HUD employees to obtain access to LOCCS);
 - (4) Direct Deposit Sign-Up Form -- Form SF-1199A and instructions;

- (5) Payment Voucher -- Form HUD 50080-EDSS 073;
- (6) Financial Status Report -- Form SF-269A and instructions;
- (7) LOCCS-VRS Change of Address Request -- Form HUD 27056 and instructions; and
- (8) LOCCS User Guide: Part I dated June 1995.
NOTE: The OPH/AONAP must provide a copy of Part I of the LOCCS User Guide dated June 1995 to grantees. The Field Office/Area ONAP must advise grantees that a LOCCS-VRS videotape, which explains the system and the initialization procedures, is available from the Field Office/Area ONAP for temporary loan.

13. GRANT AGREEMENT EXECUTION

- A. The OPH/AONAP must send a copy of the approved budget with the grant agreement. The OPH/AONAP must identify all changes to the grant application as condition(s) of approval and must provide these changes with the grant agreement. All correspondence concerning the grant award must include the project number shown on the approval letter.
- B. The OPH/AONAP must review, upon receipt from the grantee, the signed grant agreement copies and forms and check for the following:
 - (1) Ensure the tax identification number (TIN) on the Form HUD-1044 matches the TIN on Form HUD-27054. Any discrepancy must be resolved.
 - (2) Check that the authorized user and the approving official on the LOCCS-VRS Access Authorization Form HUD-27054 are different, and that the form is complete and notarized;
 - (3) Check that any other forms are properly completed as part of the Grant Agreement; and
 - (4) Check that the Form SF-1199A was completed (if required) and that the grantee information is in accordance with the LOCCS User Guide instructions, (not the instructions on the reverse of the printed Form SF-1199A), that a canceled check was provided, and that the TIN agrees with the TIN on Form HUD-1044. The grantee must have one bank depository account for all HUD PIH funds.
 - (5) The OPH/AONAP retains a copy of the completed Form HUD-27054 and sends the original along with a transmittal (indicating the form has been reviewed for accuracy and content) to:

Dept. of Housing and Urban Development
Office of Information Technology
AMISAO
451 Seventh Street, S.W., Room 3184

Washington, D.C. 20410-3600

Note: If prompt and reliable delivery is desired, use overnight mail or return receipt requested.

- (6) The Field Office forwards a transmittal letter enclosing Form SF-1199A, noting on the face of the envelope, "SF-1199A", to the following address:

Dept. of Housing and Urban Development
Office of the Chief Financial Officer
Cash and Credit Management; ATTN: ACH
P. O. Box 44816
Washington, D.C. 20026-4816

- (7) The Director, OPH/Administrator, AONAP signs the HUD-1044 in Block 20 and enters the date in Block 5, and on Page 15 of the grant agreement. After execution of the grant agreement, the OPH/AONAP must:

- a. Transmit one signed copy of the grant agreement and a copy of the IRS document (with the TIN for new grantees) and retain one copy on the grant file. The OPH/AONAP must complete these actions promptly upon receipt of acceptable materials from the grantee.
- b. Send one copy of the grant agreement to the grantee when the grant payment system is operational. The grant system is operational when the following are completed:
 - (i) Recording of the obligation of funds in the FAD;
 - (ii) Entering 1199 data into LOCCS;
 - (iii) Entering the grant budget line item entries into LOCCS and confirming that the Grantee has received its VRS number.
 - (iv) Verifying the correct banking information has been entered into LOCCS using query screen Q05 and that the TIN agrees with the grant agreement Form HUD-1044; and
 - (v) Assuring that the grantee has LOCCS-VRS access by query of LOCCS, confirming the grantee has been provided a LOCCS-VRS user identification number. (This capability is now available and it is shown on screen Q60.)

Include copies of Form HUD-50080-EDSS Payment Voucher with this transmittal.

14. GRANT AGREEMENT ADHERENCE

- A. Prior to the initial draw down, all grantees shall have secured online access to the Internet as a means to communicate with HUD on grant matters. Additionally, grantees

shall have provided 75% of the required Multifamily Tenant Characteristics System (MTCS) data to HUD.

***Note: For Tribes/TDHEs: as indicated in the PIH Notice 98-6, “Clarification of Notice PIH 97-60 (HA), Responsibility for Completion of the Form HUD-50058, Family Report,” Tribes/TDHEs are no longer required to report to the MTCS, as a result of the implementation of the Native American Housing Assistant and Self-Determination Act of 1996 (NAHASDA).**

- B. Risk Management. Grantees and subgrantees are required to implement, administer, and monitor programs so as to minimize the risk of fraud, waste, abuse, and liability for losses from adversarial legal action.

15. BUDGET LINE ITEMS

4210	Supportive Services
4220	Economic Development Activities
4230	Administrative Costs
4240	Service Coordinator(s)/Case Manager(s) Salary
4250	Other Program Costs

16. CONTACTS

LOCCS - The Headquarters point of contact for OPH/AONAP staff with questions concerning the EDSS program is Public and Indian Housing, Information Services Division at (202) 708-0614, extension 4147.

Processing Center Contact - For information, contact **Phyllis Weinstein, Grants Management Center (202) 358-0312, ext.124**, or **Tracy Outlaw, Office of Native American Programs (303) 675-1600**.

Grantee Point of Contact - The primary point of contact for grantees is the local HUD Field Office, Attention: Director, Office of Public Housing or Administrator, Office of Native American Programs.

17. APPLICATION DEBRIEFINGS

The primary point of contact for grantees are the OPH/AONAP. GMC will provide the OPH/AONAP copies of score sheets and related documents to issue with notification letters. The OPH/AONAP will be required to provide feedback, if requested, to those PHAs/Tribes/TDHEs whose EDSS applications were not approved for funding. The OPH/AONAP will have on file a copy of all applications and the reviewer's comments.

/s/

General Deputy Assistant Secretary
for Public and Indian Housing

Appendices A-I

Appendix A

ECONOMIC DEVELOPMENT AND SUPPORTIVE SERVICES PROGRAM PROCESSING SCHEDULE

<u>STEPS</u>	<u>DEADLINE DATE</u>
1. Designate Field Office/AONAP Grant Administrator (FOGA) Designate SecRep/AONAP Office Contact	June 30, 1998
2. Processing Notice provided to FOGA by GMC	July 23, 1998
3. Conduct conference call with FO/AONAP	July 28, 1998
4. Application Deadline	July 31, 1998
5. Fax master log and Fact Sheet for each application (Page 136 of Application Kit) to GMC	August 3, 1998
6. Acknowledgment letters sent to applicants	August 6, 1998
7. Screening for technical deficiencies completed and letters sent to PHAs/ Tribes/TDHEs	August 10, 1998
8. Field Office sends application and Rating Factor 5 score sheets to Secretary's Representative for comments	August 10, 1998
9. Fax to GMC master log updated for applications postmarked by 7/31 but received between 8/3 - 8/9 Also fax Fact Sheet for each new application (Page 136 of Application Kit)	August 10, 1998
10. FOGA ships all applications overnight to GMC	August 13, 1998
11. GMC receives all applications	August 14, 1998
12. GMC organizes applications for review process	August 17, 1998
13. Reviewers trained	August 17, 1998

14.	Processing Panel review begins	August 17, 1998
15.	All curable deficiency corrections/SecRep comments due to the FO/AONAP	August 17, 1998
16.	FO/AONAP faxes all deficiency corrections/SecRep comments to GMC	August 17, 1998
17.	Review of applications completed at GMC	August 28, 1998
18.	Data entry completed and validated by the Grant Administrator	August 28, 1998
19.	GMC ranks all applications	September 2, 1998
20.	Recommendations with Congressional forwarded to PIH Asst. Secretary	September 3, 1998
21.	Asst. Secretary approves grant selections	September 9, 1998
22.	GMC forwards templates of award and disapproval letters, along with list of grant awards, to FOs/AONAPs via cc:Mail	September 10, 1998
23.	GMC sends HUD-185 and list of grant awards to Budget Office	September 11, 1998
24.	FO/AONAP transmits award letters (copy to FAD to reserve funds)	September 17, 1998
25.	FAD completes reservation of EDSS grant funds	September 25, 1998
26.	FOs/AONAPs send disapproval letters completed at GMC	September 28, 1998
27.	Grant agreements completed and sent to grantees	October 1, 1998
28.	Grant Agreements signed by PHA/Tribes/TDHEs and returned to the FO/AONAP	October 10, 1998
29.	Grant Agreements signed by OPH/AONAP Administrators	October 14, 1998

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|------------|--|-------------------------|
| 30. | Budget line items entered into LOCCS | October 26, 1998 |
| 31. | Funds available for grantees
to draw down | October 30, 1998 |

Appendix B**APPLICATION MASTER LOG****Field Office Name:** _____

	HA CODE	APPLICANT NAME	DATE RECEIVED (MM/DD/YY)	TIME RECEIVED (00:00_M)	LOGGED IN BY:	TYPE OF GRANT and AMOUNT REQUESTED (type: PHA or TRIBE/TDHE)
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						

Appendix C

FY 1998 ECONOMIC DEVELOPMENT AND SUPPORTIVE SERVICES GRANT PROGRAM PROCESS CHECKLIST

This checklist will assist you as you manage the screening stage of Economic Development and Supportive Services Grant Program applications. It is recommended that the checklist items be initialed and dated as each step is completed in this review process. If there are any questions, please contact the Grants Management Center (202) 358-0312 or the Office of Native American Programs (ONAP) at (303) 675-1600, for clarification.

- _____ 1. The OPH/AONAP receives an original and two copies of the application by 6:00 p.m. (local time), **July 31, 1998.**
- _____ 2. The OPH/AONAP logs in applications received on or before the deadline date.
- _____ 3. The OPH/AONAP faxes log sheet(s) and fact sheets to Grants Management Center; Attention: Vivian Williams at (202) 358-0258, (PHAs) or Tracy Outlaw (303) 674-1660 (Tribes/TDHEs).
- _____ 4. The OPH/AONAP sends a letter to each applicant acknowledging receipt of the application. 63 FR 23912 III (A)(4)
- _____ 5. The OPH/AONAP screens applications for curable deficiencies and informs applicants of corrections needed.
- _____ 6. The screening and rescreening of all applications is complete. All curable deficiencies have been satisfied.
- _____ 7. The OPH/AONAP sends a memo to the Secretary's Representative/Senior Community Builder with the following attachments:
 - One (1) copy of each application
 - Log Sheet to Verify Receipt of Applications
 - Rating Factor 5 Score Sheet for Comment
 - Grants Management Center Mailing Address
 - The Secretary's Representative/Senior Community Builder returns the applications, a copy of the log sheet, score sheets and comment forms to the OPH/AONAP.
- _____ 8. The OPH/AONAP sends the original and one (1) copy of each application and other required documents to the GMC/ONAP, Denver by the date outlined in the Processing Schedule to the appropriate address below:

**Grants Management Center
Attn: Vivian Williams
501 School Street, SW, Suite 800
Washington, DC 20024**

**ONAP Grants Processing Center
Attn: Tracy Outlaw
1999 Broadway, Suite 3390
Denver, CO 80202**

Appendix D

APPLICATION SCREENING CHECKLIST

All applicants must address each threshold criteria requirement in order to be considered for rating and ranking. If the applicant fails to address **any** item on the list, then the application is considered incomplete and can be rejected by the screener. The following explains each threshold requirement and curable/non-curable deficiencies.

APPLICANT NAME: _____

PHA/TRIBE/TDHE CODE: _____

FIELD OFFICE NAME: _____

SCREENER NAME: _____ **DATE:** _____

TABS	COMPLETED	THRESHOLD REQUIREMENTS
	YES NO ____ _	An original and two copies of a complete application as prescribed in the application kit must be submitted to the appropriate field office by July 31, 1998 . Reviewer should check for:
	____ _	1) An original and two copies were submitted. This is a curable deficiency.
	____ _	2) Applications were submitted by 6:00 p.m. on July 31, 1998. This is a non-curable deficiency.
2,3	____ _	1. Focus on Residents Affected by Welfare Reform. (TAB 2; TAB 3, Section II) The application must contain written evidence from the applicant that at least 51% of residents to be included in the proposed program are affected by the welfare reform legislation. This requirement is not applicable to applications dealing with the elderly or persons with disabilities. This is a non-curable deficiency.
3	____ _	2. Evidence an Accessible Community Facility. (TAB 3, Section V) Provide evidence that proposed activities will be administered at community facilities in, or within easy access to, the specific public or Indian housing development(s) and meet the structural accessibility requirements of Section 504 of the Rehabilitation
TABS	COMPLETED YES NO	

Act and the Americans with Disabilities Act. **This is a non-curable deficiency.**

3,7

3. Leverage other resources
(TAB 3, Section 3 a, TAB VII))

The applicant must evidence partnerships which **equal** a 100% match for the total amount of funds requested under the EDSS program. **This is a non-curable deficiency.**

a) Reviewers should look in TAB 3, page 232, Chart E, "Program Resources", bottom left corner, to verify that "Total of Provider/Partner Contributions" and "Requested EDSS Grant Funds" are equal.

b) The above chart indicates that 25% of the resources are presented as cash.

c) Commitment letters in TAB 7 equal in total to a 100% match of funds.

d) Commitment letters in TAB 7 evidence that 25% of total commitments is presented as cash.

5

4. Comply with current programs
(TAB 5)

Applicant must evidence compliance with other HUD programs or the application is considered incomplete. Screener should check:

a) That applicant has provided certification, in the format provided in the application kit, that it is not in default at the time of the application submission. **This is a curable deficiency.**

b) That the above certification does not contradict any current information that the screening office may have on the applicant (be sure that the applicant has not been declared in default by the local field office). **This is a non-curable deficiency.**

3

5. For "troubled" HAs only, document that a Contract Administrator (or equivalent organization) will administer the grant. **This is a non-curable deficiency.**
(TAB 3, Section IV)

6

6. Have its most recent PHMAP score not less than a "C" for either Indicator #6, Financial Management, or Indicator #7, Resident Services/Community Building. Verify applicant's most recent score through field office documentation.

PHMAP Scores (Indicator #6): _____ (Indicator #7): _____

This is a non-curable deficiency.
(TAB 6, PHMAP Score)

7. Address Inspector General (IG) Findings
IG will review “Yes” responses for appropriateness and acceptability. **This is a curable deficiency.**
(TAB, Certification)

8. Equal Opportunity Requirements.
(Certification, Pg. 212).

Applicant must certify:

- a) That there are no unresolved Inspector General audit findings.

- b) That there are no pending Fair Housing Act charges against the applicant.

- c) That the applicant is not currently involved as a defendant in a Fair Housing Act lawsuit filed by the Department of Justice.

- d) That if the applicant received findings of non compliance with Title VI of the Civil Rights Act, Section 504 of the Rehabilitation Act of 1973, or Section 109 of the Housing and Community Development Act, these findings have been resolved to the satisfaction of the Department. **This is a non-curable deficiency.**

TAB 5

9. Certification on Debarment and Suspension (form HUD 2992)

Screener should check:

- a) That applicant has provided certification, in the format provided in the application kit, that it is not in default at the time of the application submission. **This is a curable deficiency.**

- b) That the above certification does not contradict any current information that the screening office may have on the applicant (be sure that the applicant has not been declared in default by the local field office). **This is a non-curable deficiency.**

TAB COMPLETED

YES NO

**OTHER CERTIFICATIONS (ARE CURABLE)
(MUST BE SIGNED/COMPLETED)**

1 _____

1. APPLICATION FOR FEDERAL ASSISTANCE
(SF-424)

Note: The Catalog of Federal Domestic Assistance Number on Form 424, block number 10; and Form 424A line b should read: 14.863. This is a **curable deficiency**.

6 _____

2. ASSURANCES - NON-CONSTRUCTION
PROGRAMS (SF-424 B)

6 _____

3. CERTIFICATION FOR A DRUG-FREE
WORKPLACE (HUD-50070)

6 _____

4. APPLICANT/RECIPIENT DISCLOSURE UPDATE
REPORT (HUD-2880)

5,8 _____

5. Compliance with Fair Housing and Civil Rights Law.

For PHAs: Certification that the applicant will comply with the requirements of the Fair Housing Act, Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, and the Age Discrimination Act of 1975, and will affirmatively further fair housing.

For Tribes/TDHEs: Compliance with the Title II of the Indian Civil Rights Act of 1968 in carrying out this Act, to the extent that such title is applicable, compliance with the Age Discrimination Act of 1975, and Section 504 of the Rehabilitation Act of 1973 (NAHASDA, Sec. 102, (5) Certification of Compliance)

(TAB 5; TAB 8 D, page 199 "Certifications, Assurances, and Blank Formats")

6 _____

6. CERTIFICATION AND DISCLOSURE OF
LOBBYING ACTIVITIES (SF-LLL)

Applicant Eligible : _____

Ineligible : _____

Screener Signature: _____ Date: _____

Appendix E

SAMPLE DEFICIENCY LETTER

Applicant
Address

Dear Applicant:

Thank you for your recent application submission for the FY 1998 Economic Development & Supportive Services Program. The (**name of local field office**) has conducted the initial screening of your application. Your application was found technically deficient in the following areas:

- 1.
- 2.
- 3.

Please provide the additional information identified within **14 days** from the date of receipt of this letter. Please submit your corrections to:

Name of Contact person
Local Field Office/AONAP
Address

The Field Office will review the response(s) submitted by your housing authority to ensure that your response(s) corrects the deficiency(s) previously identified. If your response(s) do not address the deficiencies identified above, your application will not be considered for funding. You will be notified in writing that your application is ineligible.

If you have any questions, please contact (insert name and telephone number).

Thank you for your interest in the Department's programs.

Sincerely,

Signature Name and Title

Appendix F

FY 1998 ECONOMIC DEVELOPMENT AND SUPPORTIVE SERVICES PROGRAM APPLICATION RESCREENING CHECKLIST

Directions: Use this checklist in conjunction with the screening instructions to screen responses to **curable deficiencies** to determine whether they are complete, internally consistent, and contain correct computations.

APPLICANT NAME: _____

HA CODE NUMBER: _____

TYPE OF FUNDING: _____

<u>ITEM RESCREENED</u>	<u>IS IT CURED?</u>
_____ ADDRESS AUDIT FINDINGS/EQUAL OPPORTUNITY REQUIREMENTS	Y___ N___
_____ STANDARD FORM 424	Y___ N___
_____ ASSURANCES FOR NON-CONSTRUCTION	Y___ N___
_____ DRUG-FREE WORKPLACE	Y___ N___
_____ FORM 2880	Y___ N___
_____ DISCLOSURE OF LOBBYING ACTIVITIES	Y___ N___

SUMMARY: Place check mark on applicable line

_____ After rescreening, the application has no deficiencies -- **all deficiencies are cured -- forward for reviewing and scoring.**

_____ After rescreening, the application continues to have deficiencies -- **not all deficiencies cured -- application not to be considered for reviewing and scoring.**

Screener Signature: _____ Date: _____

Appendix G

CORRECTED DEFICIENCY LOG

Field Office Name: _____

	FO LTR DATE	APPLICANT NAME	DATE RECEIVED	TIME RECEIVED	LOGGED IN BY: (Name)	COMMENTS
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						

Appendix H

**FY 1998 ECONOMIC DEVELOPMENT AND SUPPORTIVE SERVICES
PROGRAM**

APPLICATION COMMENT FORM

APPLICANT NAME: _____

HA CODE: _____

TYPE OF FUNDING/CHECK ONE:

- ☐ **Family Economic Development and Supportive Services**
☐ **Supportive Services to Assist the Elderly and/or Persons
with Disabilities**

REGARDING TAB(S):

Tab	Comment
------------	----------------

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

COMMENTS:

Name of Screener

Signature of Screener

Date

Appendix I

FY 1998 EDSS RATING FACTOR 5 COMPREHENSIVENESS AND COORDINATION Field Office Review Sheet

APPLICANT NAME: _____

HA CODE: _____

TYPE OF FUNDING/CHECK ONE:

- ☐ Family Economic Development and Supportive Services
☐ Supportive Services to Assist the Elderly and/or Persons
with Disabilities

REVIEWER NAME: _____

FIELD OFFICE NAME: _____ STATE: _____

PHONE: _____ FIELD OFFICE CODE: _____

MAXIMUM POINTS: 10

This factor addresses the extent to which the applicant coordinated its activities with other known organizations, participates or promotes participation in a community's Consolidated Planning process, and is working towards addressing a need in a holistic and comprehensive manner through linkages with other activities in the community. It is divided into three sub-factors and scores as follows.

1) Coordination with the Consolidated Plan (2 Points for Family EDSS applicants and 6 points for Elderly/Disabled applicants):

(More points are awarded in the Elderly/Disabled application in order to balance other sections of the rating criteria where points are not applicable to an Elderly/Disabled application.) The extent to which the application demonstrates the applicant has reviewed the community's Consolidated Plan and/or Analysis of Impediments to Fair Housing Choice, and has proposed activities that address the priorities, needs, goals or objectives in those documents; or substantially further fair housing choice in the community. For tribes/TDHEs, the Indian Housing Plan would be the document to review for information.

Strengths: _____

Strengths (cont.) _____

Weaknesses: _____

Points Assigned: Family EDSS applicants _____
Elderly/Disabled applicants _____

2) For Family EDSS Applications, Coordination with the State or Tribal Welfare Plan (4 Points) (Note: Elderly/Disabled Applicants are not scored on this Rating Factor) :

Provide evidence that the proposed EDSS program has been coordinated with and supports the housing authority's efforts to increase resident self-sufficiency and is coordinated and consistent with the State or Tribal Welfare Plan.

Strengths: _____

Strengths (cont.) _____

Weaknesses: _____

Points Assigned: Family EDSS applicants _____

3) Coordination with Other Activities (4 Points):

The extent to which the application demonstrates that the applicant in carrying out program activities will develop linkages with: other HUD funded program activities proposed on-going in the community; or other State, Federal or locally funded activities proposed or on-going in the community which, taken as a whole, support and sustain a comprehensive system to address the needs.

Strengths: _____

Weaknesses: _____

Points Assigned: Family EDSS applicants _____
Elderly/Disabled applicants _____

TOTAL POINTS: _____ **(Maximum: 10 points)**

Reviewer Signature: _____ Date: _____

Appendix J

FY 1998 SCORING FACTORS EZ/EC

APPLICANT NAME: _____
REVIEWERS NAME: _____
DATE OF REVIEW: _____
GRANT CATEGORY: _____
HA CODE: _____

The applicant certified that its activities/ projects (must be eligible) are in a Federally designated EZ/EC and that it serves the EZ/EC residents that its activities/projects are consistent with the EZ/EC strategic plan.

_____ 2 points if yes

_____ 0 points if no

FOGA Signature _____ Date _____